

ORIGINAL



0000118292

SLEEPY HOLLOW MOBILE HOME ESTATES

615 W. ALTURAS ST.
TUCSON, AZ 85705
(520) 624-7775

Arizona Corporation Commission

DOCKETED

SEP 24 2010

Arizona Corporation Commission
RE: Docket # W-02822A-10-0296

DOCKETED BY	
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Certification of Mailing

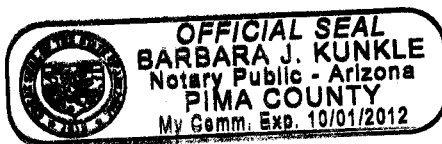
On May 1st, 2010, My manager James Cunningham, and my Assistant Manager, Armond Cyd (herein referred to as "my assigns"), in accordance with the Arizona Landlord and Tenant Act, hand delivered proper, legal notice to each resident that Sleepy Hollow Mobile Home Estates was closing it's water supply well and was to begin purchasing water from the City of Tucson.

Additionally, on September 20th, 2010, my assigns also hand delivered a copy of the notice pursuant to the order made by Judge Belinda Martin. Please find another copy of the notice enclosed. The notice was also conspicuously posted in the park office.

Yours Truly,

Danny F. Ng
Owner

Barbara J. Kunkle
Expires 01/01/2012



ARIZONA CORPORATION
COMMISSION
DOCKET CONTROL

2010 SEP 24 A 9:30

RECEIVED

Sleepy Hollow Mobilehome Estates

615 West Alturus Street
Tucson, AZ 85705

SEPT. 20 - 2010

TO: ALL TENANTS:

SLEEPY Hollow WATER WELL IS RUNNING DRY.

ON MAY-12-2010 WE ARE GOING TO BUY CITY OF TUCSON WATER.

If you have any questions about this application, you may contact Company at [COMPANY insert contact name, address and telephone number]. If you want further information on intervention or have questions on how to file comments, or request a hearing, you may contact the Consumer Services Section of the Commission at 1200 West Washington Street, Phoenix, Arizona 85007 or call 1-800-222-7000 or (520) 628-6550. All correspondence should reference Docket No. W-02822A-10-0296.

*SLEEPY Hollow Mobilehome Estates 615 W. ALTURUS, Tucson, AZ 85705
TEL - 520-4407520*
The Commission does not discriminate on the basis of disability in admission to its public meetings. Persons with a disability may request a reasonable accommodation such as a sign language interpreter, as well as request this document in an alternative format, by contacting Shaylin Bernal, ADA Coordinator, voice phone number 602/542-3931, E-mail: SBernal@azcc.gov. Requests should be made as early as possible to allow time to arrange the accommodation.

other witnesses. However, failure to intervene will not preclude any customer from appearing at the hearing and making a statement on such customer's own behalf.

If you have any questions about this application, you may contact Company at [COMPANY insert contact name, address and telephone number]. If you want further information on intervention or have questions on how to file comments, or request a hearing, you may contact the Consumer Services Section of the Commission at 1200 West Washington Street, Phoenix, Arizona 85007 or call 1-800-222-7000 or (520) 628-6550. All correspondence should reference Docket No. W-02822A-10-0296.

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TELEPHONE 520-4407520*
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YOURS TRULY,
DANNY F. NG
Danny F. NG
PTR. OWNER



Arizona Department of Water Resources
Information Management Unit
P.O. Box 33589 Phoenix, Arizona 85067-3589
(602) 771-8627 • (800) 352-8488
www.azwater.gov

NO FEE

Notice of Well Capping

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ Within five (5) days after capping an open well, the owner of the well shall file this Notice.

FILE NUMBER

WELL REGISTRATION NUMBER

55-626264

** PLEASE PRINT CLEARLY **

AZ CORPORATION COMMISSION
DOCKET NO. W02822A-10-0296

SECTION 1. REGISTRY INFORMATION

Well Type		Location of Well	
CHECK ONE		WELL LOCATION ADDRESS (IF ANY)	
<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Monitor / Piezometer	615 W. ALTURA ST. TUCSON AZ 85705	
<input type="checkbox"/> Stock	<input type="checkbox"/> Geotechnical	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE	
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Mineral Exploration	150S 14.0E 9 1/4 1/4 1/4	
<input type="checkbox"/> Municipal	<input type="checkbox"/> Other (please specify):	LATITUDE LONGITUDE	
		Degrees Minutes Seconds "N Degrees Minutes Seconds "W	
		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held	
		<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade	
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE)	
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	
		COUNTY ASSESSOR'S PARCEL ID NUMBER	
		BOOK 901 MAP 01 PARCEL 2000	
		COUNTY WHERE WELL IS LOCATED 10 40 160 SEC TOWN RANG	
		PIMA SW SW NE 9 150S 14.0E	

SECTION 2. OWNER AND FIRM INFORMATION

Well Owner		Person or Firm Installing the Cap	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
SLEEPY HOLLOW MOBILE HOME PARK		CRANE PUMP & MACHINE	
MAILING ADDRESS		MAILING ADDRESS	
615 W. ALTURA ST.		110 E. LESTER	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
TUCSON AZ - 85705		TUCSON, AZ - 85705	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
DANNY NG PTR. OWNER		JACK OWNER	
TELEPHONE NUMBER		TELEPHONE NUMBER	
520-4407529		520-7926792	
FAX		FAX	

SECTION 3. CASING AND CAPPING INFORMATION

Surface Casing		Capping	
OUTER DIAMETER (inches)		DATE WELL WAS CAPPED	
STEEL PVC ABS		9-22-2010 3:00 AM	
MATERIAL (T)		TYPE OF CAP	
IF OTHER TYPE, DESCRIBE		1/4" THICK STEEL, WELDED ON TOP.	
10"		MANUFACTURER OF CAP, IF ANY	
X			
1/4" THICK STEEL			

REMARKS

1/4" THICK STEEL WELD ON TOP

SECTION 4. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 5. WELL OWNER AND PROPERTY OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

SIGNATURE OF WELL OWNER

Danny Ng

DATE

9-22-2010